Approved for use through 12/31/2008, OMB 0651-0035

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND

CHANGE OF CORRESPONDENCE ADDRESS

es	espond to a collection of information unless it displays a valid OMB control number				
	Application Number	09/894,585			
	Filing Date	06/28/2001			
	First Named Inventor	Kanad Ghose			
	Art Unit	2157			
	Examiner Name	Osman			
	Attorney Docket Number	SUNY RB-131			

I hereby revoke all previous powers of attorney given in the above-identified application.								
A Power of Attorney is submitted herewith.								
<i>OR</i> ✓ I hereby app)37		
Please change the correspondence address for the above-identified application to: The address associated with								
Custome OR	er Number:	1000						
Firm or Individual Na	me							
Address								
City		State	:		Zip			
Country								
Telephone			Email					
I am the: Applicant/Inventor.								
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)								
SIGNATURE of Applicant or Assignee of Record								
	Signature Frank Mille							
Name Kanad Ghose								
Date 10	/_//		elephone	777 -		08		
NOTE. Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.								
Total offorms are submitted.								

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTC/SB/82 (01-06)

Approved for use through 12/31/2008, OMB 06S1-003S U.S. Patent and Trademerk Office; U.S. DEPARTMENT OF COMMERCE

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid CMB control number.

REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND

ascend to a collection of information unless it displays a valid CMB control number
Application Number 09/894,535
Filing Date 08/28/2001
First Named Inventor Kanad Ghose
Art Unit 2157
Examiner Name 0sman
Atterney Docket Number SUNY R8-131

CHANGE OF CORRESPONDENCE ADDRESS

I hereby revoke all previous powers of attorney given in the above-identified application.								
A Power of Attorney is submitted herewith.								
OR								
✓ I hereby appoint the practitioners associated with t	ne Customer Number: 10037							
Please change the correspondence address for the above-identified application to:								
The address associated with Customer Number:								
OR								
Firm or Individual Name								
Address								
City	State Zip							
Country								
Telephone	Email							
I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/S8/96)								
SIGNATURE of Applicant or Assignee of Record								
Signature grant Saluty to								
Name Peter Sulatycke								
Date 3/26/08	Telephone 847-573-6655							
NOTE: Signatures or all the "wenters or assignees of record of the entire interest or their representative(s), are required. Submit multiple imms if more than one signature is required, saparature is required, saparature								

This collection of incommation is required by 37 CER 1.35. This information is required to obtain or retain is benefit by the qubit which is to file rand by the LISPTO to process an application. Confidenceably is governed by 35 LiS. C. 122 and 37 CER 1.11 and 1.14. This collection is estimated to late 3 minutes to commission, including gathering, precaving, and submitting the commission of them 1.55. The submitted participation of the most of time your require to complete in file form and/for suggestions for medicing this burnerina, should be sufficient to the Chief Information Officer. U.S. Patent and Trademark Office, U.S. Department of Commission. P.O. Sox 1430, Alexandria, V.A. 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1430, Alexandria, V.A. 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, V.A. 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, V.A. 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, V.A. 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, V.A. 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS.

If you need assistance in completing the form, call 7-800-PTO-9199 and select option 2.

· Commission